BMT CTN PROTOCOL GUIDANCE v.2.0
24MAY2022

MINORITY ACCRUAL PLAN

- Protocol Team to review Diversity Task Force Recommendations at the beginning of the Protocol Development Phase
- Each protocol team should Complete Accrual Plan Assessment Form to assess site recruitment needs and accrual goals and develop a minority accrual plan with target accrual by patient race/ethnicity
    - This should be initiated at the beginning of each study by the statisticians for the government progress report so in the future the statistician and protocol team can work together.
        - Tools for completing the target accrual are patient demographics on previous BMT CTN studies for a specific disease (e.g., 1503 for SCD) and/or the RCI BMT's site diversity index.
    - Timing and process for completing assessment with teams
        - Completed during protocol development process; should also be revisited during the study (either the form or the target vs. actual accrual by race/ethnicity separately)
        - For new protocols the completed form will also be sent to new Patient and Caregiver Advocacy Committee for their input

USE OF EMMES STAFF OUT OF US

- NHLBI described the use of Emmes India as a "business transaction" and therefore, there is not a need for State Department clearance.
- As per email: From: Mondoro, Traci (NIH/NHLBI) [E] <mondorot@nhlbi.nih.gov> Sent: Monday, May 16, 2022 1:34 PM To: Victoria Coleman Cowger <vcolemancowger@emmes.com>

COVER PAGE

- Do not list participating centers on cover page (rather be sure to keep Clinicaltrials.gov posting current)

PROTOCOL SYNOPSIS

- Verify that the synopsis is consistent with the protocol
- Be sure to include the following three items on the Protocol Synopsis page
    - Interim Analysis
    - Stopping Guidelines
    - Correlative Studies

CHAPTER 2, § STUDY CONTACT

- Be sure to include the following paragraphs under sub header "Study Conduct":

- This study will be conducted in accordance with the protocol, *the BMT CTN MOP (if applicable), and protocol-specific documents such as a protocol-specific MOP or Study Drug Guide*.
    - Consensus ethical principles derived from international guidelines including the Declaration of Helsinki
    - Applicable ICH Good Clinical Practice (GCP) Guidelines
    - Applicable laws and regulations
- The National Marrow Donor Program (NMDP) single Institutional Review Board (IRB) of Record will oversee this study and conduct the study-specific reviews as required by federal regulations and per the NMDP IRB Standard Operating Procedures (SOPs).
- Site personnel will enter data in the electronic case report form(a) (eCRF) in [*name of database(s)*] as described in the BMT CTN #### Forms Guide. Source documentation should be made available for monitoring visits, audits and regulatory inspections as described in the BMT CTN MOP.
- Participating Principal Investigators bear ultimate responsibility for training of site staff as well as the scientific, technical, and administrative aspects of conduct of the protocol, even when certain tasks have been delegated to coinvestigators, sub-investigators, or staff. The PIs have a responsibility to protect the rights and welfare of participants and comply with all requirements regarding the clinical obligations and all other pertinent requirements in 21 CFR part 312. In addition to following applicable federal, state, and local regulations, investigators are expected to follow ethical principles and standards and receive training in *GCP every three years and human subjects training within the past 3 years [terms may be protocol-specific)* and thereafter as per institutional requirements.

CHAPTER 4, CIBMTR Language – verify with Kavita Bhavsar (kavitab@mcw.edu). For both

- For studies in which patients are enrolled prior to transplant
    - The participant must be registered with the Center for International Blood and Marrow Transplant Research (CIBMTR) and have a valid unique ID (CRID) number. Centers participating in BMT CTN trials must register pre and post-transplant outcomes on all consecutive hematopoietic stem cell transplants done at their institution during their time of participation to the CIBMTR. Registration is done using procedures and forms of the Stem Cell Transplant Outcomes Database (SCTOD). (Note: Federal legislation requires submission of these forms for all US allotransplant recipients.) Enrollment of BMT CTN #### must be indicated on the SCTOD pre-transplant registration form. Additionally, CIBMTR pre- and post-transplant Report Forms must also be submitted for all participants enrolled on this trial. according to the randomization assigned to the patient at the time of initial registration with the CIBMTR. Long-term follow-up of patients on this study will continue through routine CIBMTR mechanisms.
- For studies in which patients are enrolled post-transplant (note the CRID must be a required field on one of the study's CRFs).
    - Centers participating in BMT CTN trials must register pre and post-transplant outcomes on all consecutive hematopoietic stem cell transplants done at their institution during their time of participation to the Center for International Blood and Marrow Transplant Research (CIBMTR). Registration is done using procedures and forms of the Stem Cell Transplant Outcomes Database (SCTOD). (Note: Federal legislation requires submission of these forms for all US allotransplant recipients.) CIBMTR post- transplant Report Forms must continue to be submitted

for all patients enrolled on this trial. Additionally, CIBMTR pre- and post- transplant Report Forms must also be submitted for all patients enrolled on this trial according to the randomization assigned to the patient at the time of initial registration with the CIBMTR. Long-term follow-up of patients on this study will continue through routine CIBMTR mechanisms.

APPENDIX A HUMAN SUBJECTS

- If you study excludes women or subjects <18 years of age or elderly patients, review the following information and sample text from 1703:
  - This policy applies to all competing grant applications for due dates on or after January 25, 2019. Ongoing, non-competing awards will not be expected to comply with this policy until the grantee submits a competing renewal application. For R&D contracts, the policy will apply to all solicitations issued on or after this effective date. For the intramural program, the policy applies to intramural studies submitted initiated on or after January 25, 2019.
    - NOT-OD-18-116 Revision: NIH Policy and Guidelines on the Inclusion of Individuals Across the Lifespan as Participants in Research Involving Human Subjects
    - Revises NIH policy and guidelines on the Inclusion of Children. Changes to the policy include (1) the applicability of the policy to individuals of all ages, including children and older adults; (2) clarification of potentially acceptable reasons for excluding participants based on age; and (3) a requirement to provide data on participant age at enrollment in progress reports. The policy applies to competing grant applications for due dates on or after January 25, 2019. Ongoing, non-competing awards will not be expected to comply with this policy. For R&D contracts, the policy will apply to all solicitations issued on or after this effective date.
  - Example text from 1703: Participation of Women and Minorities
    - Women and ethnic minorities and other populations will be included in this study. Accrual of women and minorities at each center will be monitored to determine whether their rates of enrollment are reflective of the distribution of potentially eligible women and minorities expected from data reported to the CIBMTR and from published data on incidence of leukemia and lymphoma in these groups. Centers will be notified if their rates differ significantly from those expected and asked to develop appropriate recruitment reports.
    - Patients under the age of 18 years will not be eligible to enroll on this study. Reduced Intensity Conditioning (RIC) is not a standard therapy for patients in this age group. In addition, PBSC grafts are not used standardly in this age group for allogeneic transplants.

CONSENT FORM REQUIREMENTS

- Clinicaltrials.gov language must be inserted verbatim: A description of this clinical trial will be available on http://www.ClinicalTrials.gov as required by U.S. Law. This Web site will not include information that will identify you. At most, the Web site will include a summary of results. You can search this web site at any time.
- CoC language must be inserted verbatim in the section titled “Who will see my medical information”: Your privacy is very important to us. The study doctors will make every effort to protect it. The study doctors have a privacy permit to help protect your records if there is a court case. However, some of your medical information may be given out if required by law. If this should happen, the study doctors will do their best to make sure that any information that goes out to others will not identify you.

- CIBMTR Data collection language: Data regarding your clinical situation, including follow up after [insert number of years of protocol follow up] may be obtained by the BMT CTN from the CIBMTR, which captures information on all US transplants.
- BioLincc language (TBD)
- Common Rule update to be included for studies initiated after Jan 21, 2019. This requires a study summary at the beginning of the Consent Form
- FOIA & PHI language from 1506 in IC : our confidentiality is one of our main concerns. We will do our best to make sure that the personal information in your medical record is kept confidential (private). However, we cannot promise total privacy.'
- 'We may have to give out your personal information if required by law. It may also be used in reports of the study or for scientific presentations that are published or presented in a public forum. Astellas may also wish to use the data from this study for future medical research or to share study data with other researchers. In such cases, your personal details will be made anonymous or pseudonymized, or made through the use of artificial identifiers less personally identifying. You will not be identified in any publication from this study'.
- Your privacy is very important to us. The study doctors will do everything they can to protect it. This study has a "Certificate of Confidentiality," which means the study doctors can protect your records if there is a court case.
- The study sponsor [will/will not] pay for medical treatment as a result of unintended injury. *[Add Sponsor language as appropriate; for GRANT studies, the sponsor does not pay]*.
- The ethics of this study have been reviewed and approved by the NMDP IRB.

NMDP IRB Initial Approval

- Submit FAQs and up to 10 PowerPoint slides with NMDP initial IRB submission of protocol
- Remember all patient facing materials will need to go to the NMDP IRB approval, e.g., QOL/PROMIS questionnaires and screen shots, patient hand-outs etc.